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AHDC Email Network – Data, News, Articles and Policies Related to Health Disparities

May 05 – 11, 2011

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1) Video: Changing Face of Poverty in Arizona

The Arizona Community Action Association has produced an excellent short video that depicts the Changing Face of Poverty in Arizona.

<http://www.azcaa.org/images/ACAA-video/ACAA-video.html>

2) Study Shows association between low health literacy and all-cause mortality among patients with heart failure

The *Journal of the American Medical Association* published a paper called "Health Literacy and Outcomes Among Patients With Heart Failure" at 2011; 305(16): 1695-1701. The authors evaluated the association between low health literacy and all-cause mortality and hospitalization among outpatients with heart failure and concluded that among patients with heart failure in an integrated managed care organization, low health literacy was significantly associated with higher all-cause mortality.

<http://jama.ama-assn.org/content/305/16/1695.abstract>

3) Food Desert Locator

Created by the USDA Economic Research Services, the Food Desert Locator offers an interactive mapping tool to view census tract-level statistics on population groups with low access to healthy food, plus related information on food deserts (low-income neighborhoods with high concentrations of

people who are far from a grocery store).

<http://www.ers.usda.gov/data/fooddesert/index.htm>

4) Kaiser Releases Comprehensive Chartbook on Women's Health Care

The chartbook includes the findings from a national survey of women ages 18 to 64 and provides a look at the experiences of women in the health care system. It presents a wide range of data on women's health issues, including insurance coverage, affordability of and access to care, use of health care services, prevention, and family health. The survey was conducted in 2008, and builds on data collected during previous women's health surveys conducted by the Foundation in 2001 and 2004. Key findings presented in the chartbook include nearly one quarter of women were uninsured for at least part of the previous year, and one quarter of uninsured women had been without coverage for at least four years; women in poverty and Latinas were at greatest risk for being uninsured; health care costs continued to be a barrier for both uninsured and insured women; one quarter of women went without or delayed needed care because they could not afford the out of pocket costs; women's use of preventive services, particularly provider counseling, continued to be low; about half of women had talked to a provider about diet and exercise in the past year, and fewer than one-third discussed issues like sexually transmitted diseases or domestic violence with a provider in the prior three years; women shoulder the majority of family health decisions; eight in ten mothers said they had primary responsibility for taking their children to the doctor and ensuring that they receive follow up care; half of working mothers must miss work when their children are sick, and half of these women lose pay when they stay home to care for sick kids; and one in ten women were caregivers to frail or ill family members. One in five of these women report spending more than 40 hours per week on caregiving as well as strains on their family finances as a consequence.

<http://www.kff.org/womenshealth/8164.cfm>

5) Middle Eastern and North African Immigrants in the United States

The report, written by the Migration Policy Institute, focuses on the foreign born from the Middle East and North Africa residing in the United States, and examines the population's size, geographic distribution and socioeconomic characteristics using data from the US Census Bureau's 2007-2009 American Community Survey (ACS) and the 1990 and 2000 Decennial Censuses.

<http://www.migrationinformation.org/USFocus/display.cfm?ID=830>

6) New DHHS report shows that most uninsured unable to pay hospital bills

A new report released by the U.S. Department of Health and Human Services (DHHS) shows that few families without health insurance have the financial assets to pay potential hospital bills. On average, uninsured families can only afford to pay in full for approximately 12-percent of hospital stays they may

experience – and even higher income uninsured families are unable to pay for most potential hospital stays. Hospital stays for which the uninsured cannot pay in full account for 95-percent of the total amount hospitals bill the uninsured. Other studies have estimated that the bills for all types of health care that the uninsured cannot pay – the uncompensated cost of care – is up to \$73 billion a year, a significant portion of which is shifted into higher costs for Americans with insurance and their employers.

<http://aspe.hhs.gov/health/reports/2011/ValueofInsurance/rb.shtml>